

| POSITION | INITIALS | ID NO. | DATE |
|---------------------|----------|--------|---------|
| FEE DETERMINATION | W | 10841 | 3/18 |
| O.I.P.E. CLASSIFIER | | | |
| FORMALITY REVIEW | W | 66080 | 3/19/99 |

INDEX OF CLAIMS

| | | | |
|---|----------------------------|---|--------------|
| ✓ | Rejected | N | Non-elected |
| = | Allowed | I | Interference |
| - | (Through numeral) Canceled | A | Appeal |
| + | Restricted | O | Objected |

| Claim | Date |
|----------------|--------|
| Final Original | |
| 1 | 1/1/00 |
| 2 | 1/1/00 |
| 3 | 1/1/00 |
| 4 | 1/1/00 |
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| 6 | 1/1/00 |
| 7 | 1/1/00 |
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| Claim | Date |
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| Final Original | |
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| Claim | Date |
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| Final Original | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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